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Christian R. Andersen From:

June 16, 2005 Date:

Number of Pages Including Cover: 15

FORMAL SUBMISSION OF: MESSAGE:

1) Amendment/Reply transmittal letter; and

2) Amendment.

Attorney Docket No.: 00-VE02.64

Appl. No.: 09/487,049

Applicants: Mohammad Reza SHAFIEE, Sankar SUBRAMANIAN

Filed: January 19, 2000

Title: METHODS AND APPARATUS FOR PROVIDING AGENT CONTROLLED

SYNCHRONIZED BROWSING AT A TERMINAL

TC/A.U.: 3621

Examiner: John W. Hayes

CERTIFICATE OF FACSIMILE TRANSMISSION

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Christian Andersen Type or print name of person signing certification June 16, 2005

Signature

Patent Attorney's Docket No. 00-VE02.64

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re F	atent Ap	plication of)		REÇEIVED CENTRAL FAX CENTER
Moha Sanka	mmad Re	za SHAFIEE, MANIAN)	Group Art Unit: 3621	JUN 1 6 2005
Appli	cation No	o.: 09/487 , 049))	Examiner: John W. Hayes	
Filed:	January	19, 2000)		
For:	FOR PE	DDS AND APPARATUS ROVIDING AGENT ROLLED SYNCHRONIZE SING AT A TERMINAL) ED)		
		AMENDMENT/RI	EPLY TE	RANSMITTAL LETTER	
Com P.O.	Box 1450	For Patents) irginia 22313-1450			
	Enclos	sed is a reply for the above	-identifie	d patent application.	
		A Petition for Extension	of Time i	s also enclosed.	
		A Terminal Disclaimer as requisite Government fee	nd a chec are also	k for [\$55.00	00 to cover the
		Applicant(s) request cont	inued ex	amination under 37 C.F.R. §	1.114 and enclose
		the \$395.00	\$790.00	fee due under 37 C.F.R. §	1.17(e).
		Applicant(s) previous examination is reque	ısly subn sted.	nitted, on, for w	hich continued
		A request for Entry and (is also enclosed.	Consider	ation of Submission under 37	C.F.R. § 1.129(a)

Amendment/Reply Transmittal Letter Application Serial No. 09/487,049 Attorney's Docket No. 00-VE02.64 Page 2

\boxtimes	No additional claim fee is required.
\Box	An additional claim fee is required, and is calculated as shown below:

	No. of Claims	Highest No. Of Claims Previously Paid For	Extra Claims	Rate	Additional Fee
Total				x \$50.00 =	
Claims	18	35	0		00.00
Ind.	,			x \$200.00 =	
Claims	9	9	0		00.00
If Amendm	nent adds mu	ltiple dependent cl	aims, add \$280	0.00	
Total Ame	ndment Fee				
If Small or	tity status is	claimed, subtract	50% of Total A	Amendment Fee	
		AL FEE DUE FO	·		00.00

A claim fee in the amount of \$	is enclosed.
Charge \$ to Deposit Account no.	. 07-2347.

Amendment/Reply Transmittal Letter Application Serial No. 09/487,049 Attorney's Docket No. 00-VE02.64 Page 3

The Commissioner is hereby authorized to charge any other appropriate fees that may be required by this paper that are not accounted for above, and to credit any overpayment, to Deposit Account No. 07-2347.

Respectfully submitted,

By

Joel Wal

Reg. No. 25/48

Verizon Corporate Services Group Inc.

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AMENDMENT

Sir:

In response to the Miscellaneous Communication mailed on May 25, 2005 ("the communication"), which set a period for response to expire on June 25, 2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.